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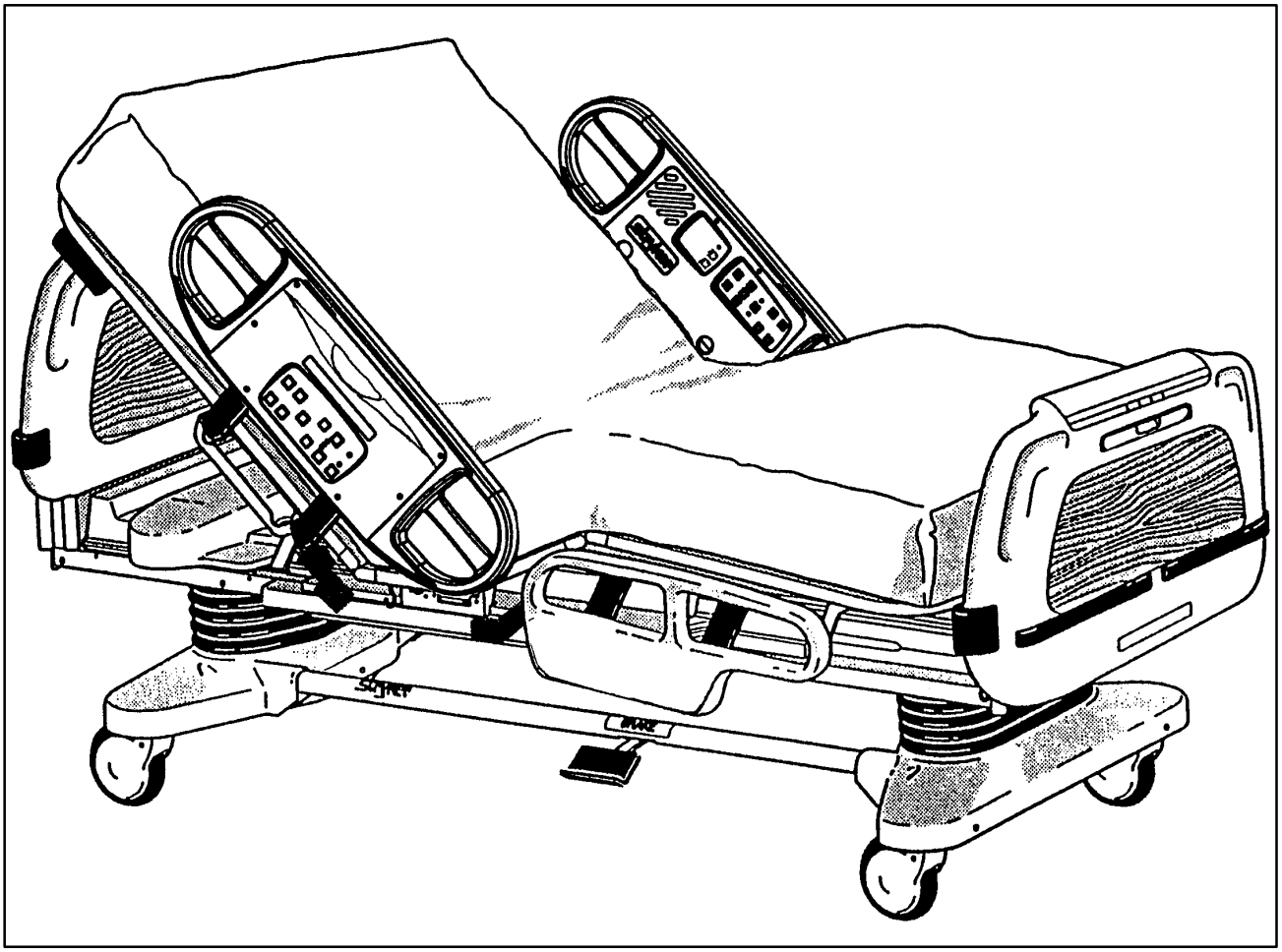

Secure 3000 Bed

OPERATIONS MANUAL

For Parts or Technical Assistance
1–800–327–0770

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INTRODUCTION

This manual is designed to assist you with the operation of the Secure 3000 Bed. Read it thoroughly before using the equipment.

SPECIFICATIONS

Maximum Weight Capacity	500 pounds (227 kilograms)
Overall Bed Length/Width	93” x 42–1/2” (with siderails up) – 36” (with siderails down) 238 cm. x 109 cm. (with siderails up) – 92 cm. (with siderails down)
Patient Sleep Surface	84” x 35” – 215 cm. x 90 cm.
Bed Height (to top of seat litter)	16” (Low) x 29–1/2” (High) – 41 cm. (Low) x 76 cm. (High)
Knee Gatch Angle	0° to 40°
Fowler Angle	0° to 60°
Trendelenburg/Reverse Trendelenburg	–11° to +11°
Weigh System Accuracy (optional equipment)	± 1% of total patient weight while the bed is level and up to a 4° or –4° angle ± 3% of total patient weight from 5° to 11° angle or –5° to –11° angle
Electrical Requirements – all electrical requirements meet UL 544 specifications.	115 VAC, 60 Hz, 7.0 Amp. w/o outlet 115 VAC, 60 Hz, 12.0 Amp. w/outlet 230 VAC, 50/60 Hz, 4.0 Amp.

WARNING / CAUTION / NOTE DEFINITION

The words WARNING, CAUTION and NOTE carry special meanings and should be carefully reviewed.

WARNING

The personal safety of the patient or user may be involved. Disregarding this information could result in injury to the patient or user.

CAUTION

These instructions point out special procedures or precautions that must be followed to avoid damaging the equipment.

NOTE

This provides special information to make important instructions clearer.

WARNING

Always apply the caster brakes when a patient is getting on or off the bed. Push on the bed to ensure the brakes are securely locked. Always engage the brakes unless the bed is being moved. Injury could result if the bed moves while a patient is getting on or off the bed.

SAFETY TIPS AND GUIDELINES

Before operating the Secure Bed, it is important to read and understand all information in this manual. Carefully read and strictly follow the safety guidelines listed on this page.

It is important that all users have been trained and educated on the inherent hazards associated with the usage of electric beds.

WARNING

- The Secure 3000 Bed is not intended for use with patients less than two years of age.
- Powered bed mechanisms can cause serious injury. Operate bed only when all persons are clear of the mechanisms.
- To help reduce the number and severity of falls by patients, always leave the bed in the lowest position when the patient is unattended.
- Leave the siderails fully up and locked when the patient is unattended. When raising the siderails, listen for the ”click” that indicates the siderail has locked in the up position. Pull firmly on the siderail to ensure it is locked into position.
  Siderails are not intended to be a patient restraint device. It is the responsibility of the attending medical personnel to determine the degree of restraint necessary to ensure a patient will remain safely in bed.
- Always keep the caster brakes applied when a patient is on the bed (except during transport). Serious injury could result if the bed moves while a patient is getting in or out of bed. After the brake pedal is applied, push on the bed to ensure the brakes are locked. When moving the bed, toggle the steer pedal to put the bed in the steer mode. This locks the swivel motion of the right foot end caster and makes the bed easier to move.
- Do not attempt to move the foot end of the bed laterally when the steer pedal is activated. When the steer pedal is activated, the steer caster at the foot end of the bed cannot swivel. Attempting to move the bed laterally when the steer pedal is activated may cause injury to the user.
- When large spills occur in the area of the circuit boards, 110 volt cables and motors, immediately unplug the bed power cord from the wall socket. Remove the patient from the bed and clean up the fluid. Have maintenance completely check the bed. Fluids can affect the operational capabilities of any electrical product. DO NOT put the bed back into service until it is completely dry and has been thoroughly tested for safe operation.
- Do not steam clean or hose off the bed. Do not immerse any part of the bed. The internal electric parts may be damaged by exposure to water. Hand wash all surfaces of the bed with warm water and mild detergent. Dry thoroughly. Quaternary Germicidal Disinfectants, used as directed, and/or Chlorine Bleach products, typically 5.25% Sodium Hypochlorite in dilutions ranging between 1 part bleach to 100 parts water, and 2 parts bleach to 100 parts water are **not** considered mild detergents. THESE PRODUCTS ARE CORROSIVE IN NATURE AND MAY CAUSE DAMAGE TO YOUR BED IF USED IMPROPERLY. If these types of products are used to clean Stryker patient care equipment, measures must be taken to insure the beds are wiped with clean water and thoroughly dried following cleaning. Failure to properly rinse and dry the beds will leave a corrosive residue on the surface of the bed, possibly causing premature corrosion of critical components. Failure to follow the above directions when using these types of cleaners may void this product’s warranty.
  Clean Velcro **AFTER EACH USE**. Saturate Velcro with disinfectant and allow disinfectant to evaporate. (Appropriate disinfectant for nylon Velcro should be determined by the hospital.)
- Preventative maintenance should be performed at a minimum of biannually to ensure all bed features are functioning properly. Close attention should be given to safety features including, but not limited to: safety side latching mechanisms, frayed electrical cords and components, all electrical controls return to off or neutral position when released, caster braking systems, no controls or cabling entangled in bed mechanisms, leakage current 100 microamps maximum, scale and bed exit systems calibrated properly.
- Always unplug bed during service or cleaning. When working under the bed with the bed in the high position, always place blocks under the litter frame and set the brakes to prevent injury in case the Bed Down switch is accidently pressed.

CLEANING

Hand wash all surfaces of the bed with warm water and mild detergent. Dry thoroughly.

CAUTION

Quaternary Germicidal Disinfectants, used as directed, and/or Chlorine Bleach products, typically 5.25% Sodium Hypochlorite in dilutions ranging between 1 part bleach to 100 parts water, and 2 parts bleach to 100 parts water are **not** considered mild detergents. THESE PRODUCTS ARE CORROSIVE IN NATURE AND MAY CAUSE DAMAGE TO YOUR BED IF USED IMPROPERLY. If these types of products are used to clean Stryker patient care equipment, measures must be taken to insure the beds are wiped with clean water and thoroughly dried following cleaning. Failure to properly rinse and dry the beds will leave a corrosive residue on the surface of the bed, possibly causing premature corrosion of critical components. Failure to follow the above directions when using these types of cleaners may void this product's warranty.

CAUTION

Do not steam clean or hose off the Secure 3000 Bed. Do not immerse any part of the bed. Some of the internal parts of the bed are electric and may be damaged by exposure to water.

Clean Velcro **AFTER EACH USE**. Saturate Velcro with disinfectant and allow disinfectant to evaporate. (Appropriate disinfectant for nylon Velcro should be determined by the hospital.)

In general, when used in those concentrations recommended by the manufacturer, either phenolic type or quaternary type disinfectants can be used with Staph–Chek fabrics. Iodophor type disinfectants are not recommended for use on Staph–Chek fabrics because staining may result. The following products have been tested by the Herculite Laboratory and have been found not to have a harmful effect on Staph–Chek fabrics WHEN USED IN ACCORDANCE WITH MANUFACTURERS RECOMMENDED DILUTION.*

TRADE NAME	DISINFECTANT TYPE	MANUFACTURER	*MANUFACTURER'S RECOMMENDED DILUTION
A33	Quaternary	Airwick (Professional Products Division)	2 ounces/gallon
A33 (dry)	Quaternary	Airwick (Professional Products Division)	1/2 ounce/gallon
Beaucoup	Phenolic	Huntington Laboratories	1 ounce/gallon
Blue Chip	Quaternary	S.C. Johnson	2 ounces/gallon
Elimstaph	Quaternary	Walter G. Legge	1 ounce/gallon
Franklin Phenomysan F2500	Phenolic	Purex Corporation	1 1/4 ounce/gallon
Franklin Sentinel	Quaternary	Purex Corporation	2 ounces/gallon
Galahad	Phenolic	Puritan Churchill Chemical Company	1 ounce/gallon
Hi–Tor	Quaternary	Huntington Laboratories	1/2 ounce/gallon
LPH	Phenolic	Vestal Laboratories	1/2 ounce/gallon
Matar	Phenolic	Huntington Laboratories	1/2 ounce/gallon
Omega	Quaternary	Airwick (Professional Products Division)	1/2 ounce/gallon
Quanto	Quaternary	Huntington Laboratories	1 ounce/gallon
Sanikleen	Quaternary	West Chemical Products	2 ounces/ gallon
Sanimaster II	Quaternary	Service Master	1 ounce/gallon
Vesphene	Phenolic	Vestal Laboratories	1 1/4 ounce/ gallon

REMOVAL OF IODINE COMPOUNDS

This solution may be used to remove iodine stains from mattress cover and foam surfaces.

Use a solution of 1–2 tablespoons Sodium Thiosulfate in a pint of warm water to clean the stained area. Clean as soon as possible after staining occurs. If stains are not immediately removed, allow solution to soak or stand on the surface.

Preventative Maintenance

CHECKLIST

_____ All fasteners secure (reference all assembly prints)
_____ Engage brake pedal and push on the bed to ensure all casters lock securely
_____ ”Brake Not Set” LED (on foot board) blinks when brakes are not engaged
_____ Locking steer caster engages and disengages properly
_____ Siderails move, latch and stow properly
_____ CPR release working properly
_____ Foot prop intact and working properly
_____ I.V. pole working properly
_____ Foley bag hooks intact
_____ Optional chart rack intact and working properly
_____ Optional CPR board not cracked or damaged and stores properly
_____ No cracks or splits in head and foot boards
_____ No rips or cracks in mattress cover
_____ All functions on head end siderails working properly (including LED’s)
_____ All functions on footboard working properly (including LED’s)
_____ Scale and Bed Exit system calibrated properly
_____ Motion Interrupt switches working properly
_____ Optional night light working properly
_____ Power cord not frayed
_____ No cables worn or pinched
_____ All electrical connections tight
_____ All grounds secure to the frame
_____ Ground impedance not more than 100 milliohms
_____ Current leakage not more than 100 microamps
_____ Apply grease to litter grease points

Bed Serial No. _____ _____

_____ _____

_____ _____

_____ _____

_____ _____

Completed By:_____ Date:_____

SET–UP PROCEDURES

It is important that the Secure 3000 Bed is working properly before it is put into service. The following list will help ensure that each part of the bed is tested.

- Plug the bed into a properly grounded, hospital grade wall receptacle and ensure the ”Power” LED light at the foot end of the bed comes on.

WARNING

The 3000 is equipped with a hospital grade plug for protection against shock hazard. It must be plugged directly into a properly grounded three–prong receptacle. Grounding reliability can be achieved only when a hospital grade receptacle is used.

- Plug the optional interface cable into the 37 pin connector under the litter frame at the head end of the bed, and into the ”Patient Station”, ”Head Wall”, ”Docker Station”, or equivalent (whichever applies). Test the interface cable to verify it is functioning properly.

WARNING

Use only a Stryker supplied interface cable. Use of any other cable may cause the bed to function improperly which may result in patient or user injury.

- Ensure the siderails raise, lower and store smoothly and lock in the up and intermediate positions (page 13).
- Ensure that all four casters lock when the brake pedal is engaged (page 8).

NOTE

Ensure that the ”Brake Not Set” LEDs located on the outside of the head end siderails and on the foot board control panel come on when the brakes are disengaged.

- Run through each function on the foot board control panel to ensure that each function is working properly (page 17–19).
- Run through each function on both head end siderails to ensure that each is working properly (page 14–16).
- Activate the motion stop system to ensure it is functioning properly: press and hold down the BED DOWN key. As the bed lowers, lift up on the motion interrupt pan (page 7) and ensure the downward motion stops. Release the pan and allow the downward motion to continue.

NOTE

The bed’s upward motion or other functions are not disrupted by the motion stop system.

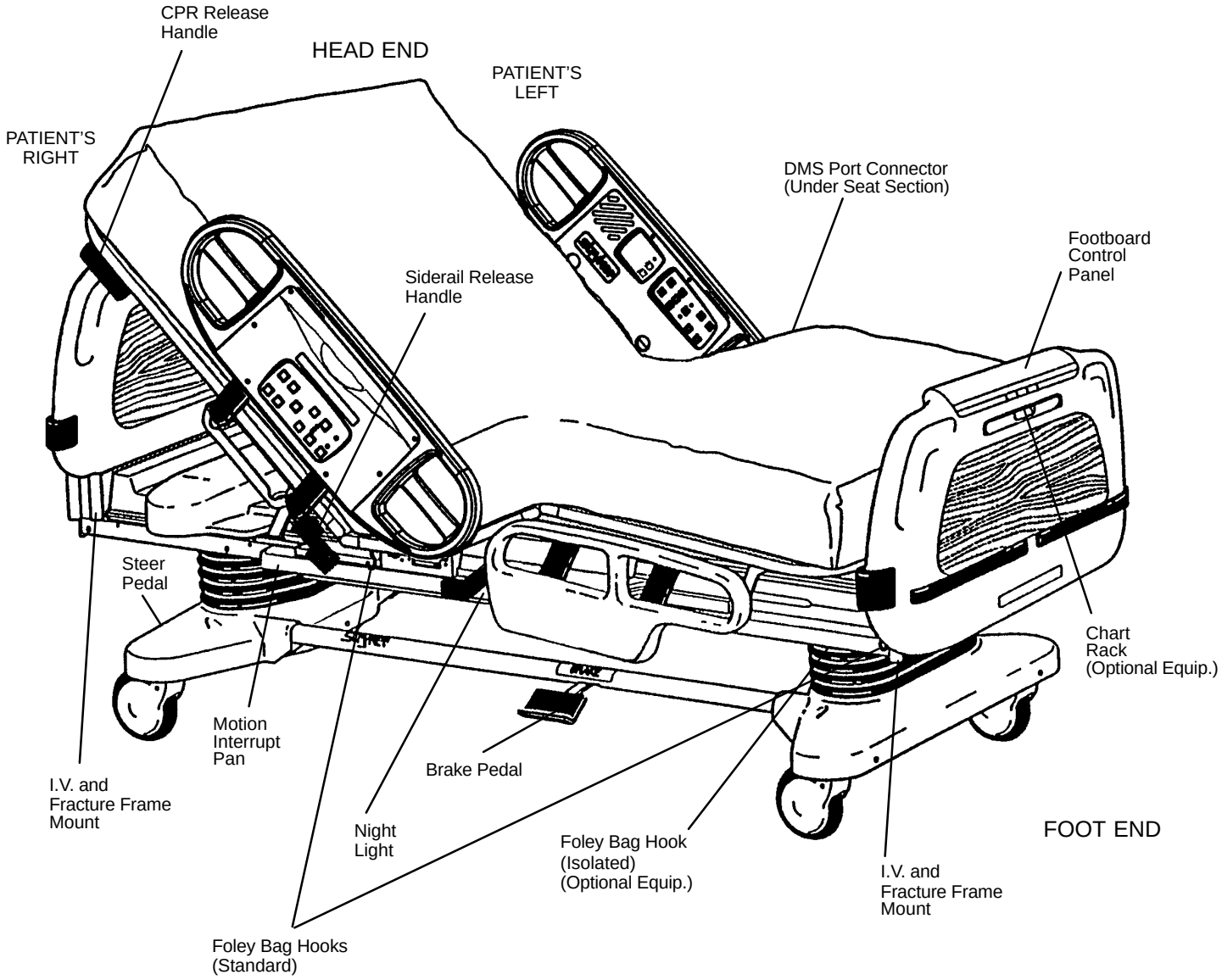
If any problems are found during bed set–up, contact Stryker Customer Service at 800–327–0770.

Damaged Merchandise

ICC Regulations require that claims for damaged merchandise must be made with the carrier within fifteen (15) days of receipt of merchandise. DO NOT ACCEPT DAMAGED SHIPMENTS UNLESS SUCH DAMAGE IS NOTED ON THE DELIVERY RECEIPT AT THE TIME OF RECEIPT. Stryker Customer Service must be notified immediately. Stryker will aid the customer in filing a freight claim with the appropriate carrier for damages incurred. Claim will be limited in amount to the actual replacement cost. In the event that this information is not received by Stryker within the fifteen (15) day period following the delivery of the merchandise, or the damage was not noted on the delivery receipt at the time of receipt, the customer will be responsible for payment of the original invoice in full.

Claims for any short shipment must be made within thirty (30) days of invoice.

Bed Illustration



BRAKE PEDAL OPERATION

WARNING

Always apply the caster brakes when a patient is getting on or off the bed. Push on the bed to ensure the brakes are securely locked. Always engage the brakes unless the bed is being moved. Injury could result if the bed moves while a patient is getting on or off the bed.

To activate the brakes, push down once on the pedal identified by the label at right (located at the midpoint of the bed on both sides). To disengage, push down once.

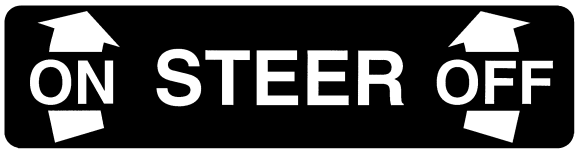
NOTE

There are LED lights on the outside of the head end siderails and on the foot end control panel that will blink when the brakes are not engaged only if the bed is plugged into a wall socket (see pages 16 & 17). The brakes will still operate properly when the bed is not plugged in.

STEER PEDAL OPERATION

The purpose of the steer caster is to help guide the bed along a straight line and to help with pivoting at corners when the bed is moved.

To activate the steer caster, move the pedal located at the head end of the bed to your left as shown on the label.



NOTE

For proper ”tracking” of the steer caster, push the bed approximately 10 feet to allow the wheels to face the direction of travel before engaging the steer pedal. If this is not done, proper ”tracking” will not occur and the bed will be difficult to steer.

WARNING

Do not attempt to move the foot end of the bed laterally when the steer pedal is activated. When the steer pedal is activated, the steer caster at the foot end of the bed cannot swivel. Attempting to move the bed laterally when the steer pedal is activated may cause injury to the user.

CPR EMERGENCY RELEASE USAGE

When quick access to the patient is needed, and the Fowler is raised, squeeze one of the two red release handles (see illustration, page 7) and the Fowler can be guided down to a flat position.

NOTE

The handle can be released at any time to stop the Fowler from lowering.

FOLEY BAG HOOKS USAGE, STANDARD AND ISOLATED (Isolated Optional Equipment)

The standard Foley bag hooks are found at two locations on both sides of the bed, under the frame rail below the seat section and at the extreme foot end of the bed.

NOTE

The patient weight reading on the bed scale system will be affected by using the standard Foley bag hooks.

The optional isolated Foley bag hooks are located under the litter frame at the top of the foot end bellows.

CAUTION

The Foley bag hooks move when the Fowler is raised or lowered. Fowler motion must be locked out when using these hooks to avoid inadvertent movement of the hooks.

NOTE

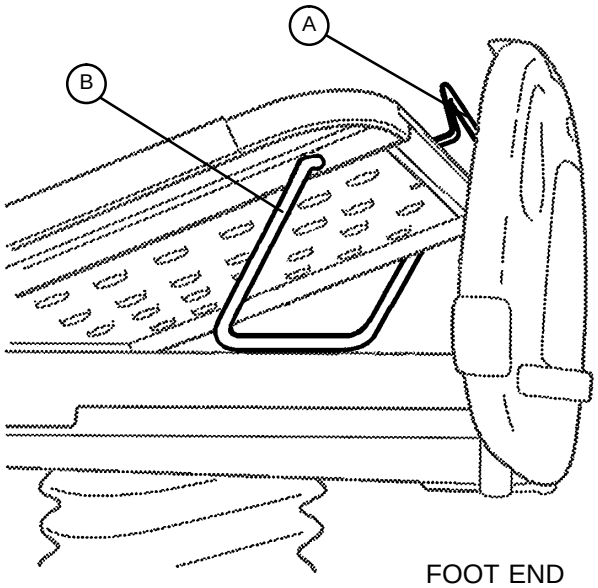
The patient weight reading on the bed scale system will not be affected by usage of the isolated Foley bag hooks.

FOOT PROP USAGE

To prop the foot end of the Knee Gatch up, grasp the handle (A) at the end of the Knee Gatch and lift upward, allowing the latch arm to engage at the desired height. To release the prop, (B) lift up on the handle (A) and swing the foot prop (B) toward the head end of the bed to disengage the hinge and allow the foot end to lower.

WARNING

The intent of the foot prop is to elevate a patient's feet. To avoid injury while cleaning or servicing under the foot section, secure the foot section with string or bungee cords or hold it up out of the way.



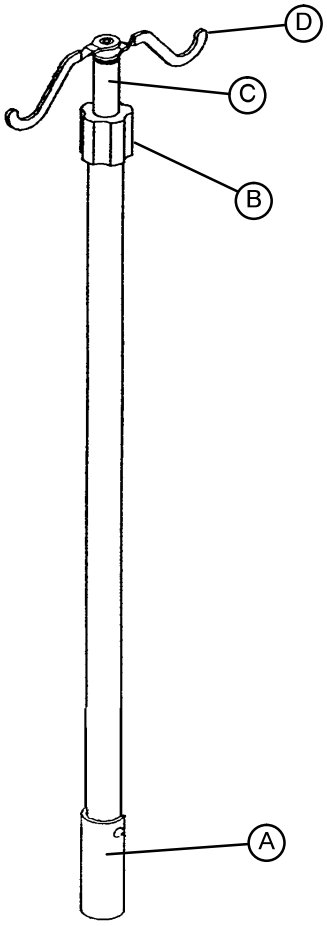
FRACTURE FRAME USAGE

A standard fracture frame can be mounted on the bed using the I.V. sockets located on all four corners of the bed. I.V. poles can be used in conjunction with a fracture frame if I. V. pole adaptor sockets are purchased.

WARNING

Use only retractable traction or fracture frames. Failure to use a retractable frame may result in injury to the patient and/or damage to the equipment.

I.V. POLES



To use the Permanently Attached I.V. pole (optional equipment):

1. Lift and pivot the pole from the storage position and push down until it is locked into receptacle (A).

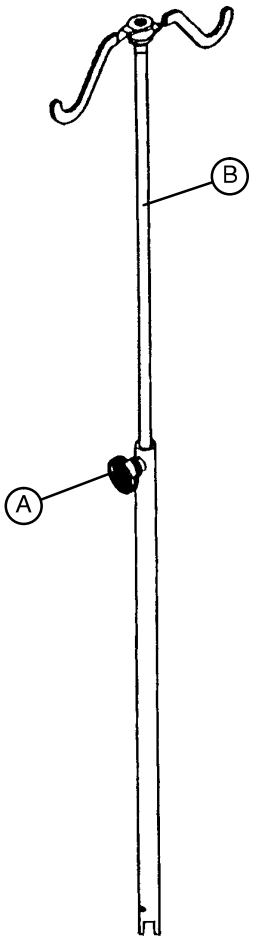
2. To raise the height of the pole, turn the lock actuator (B) counter–clockwise and pull up on the telescoping portion (C) of the pole to raise it to the desired height.

3. Turn the lock actuator (B) clockwise to lock the telescoping portion in place.

4. Rotate the I.V. hangers (D) to desired position and hang I.V. bags.

CAUTION

The weight of the I.V. bags should not exceed 40 pounds.



To use the ”Removable” I.V. pole (optional equipment):

1. Remove the pole from its storage position located at the foot end of the bed, under the foot board, or at the left side of the bed below the litter.

2. Install the pole at any of the six receptacles on the bed top (located on all four corners of the bed and at the midpoint of the bed, on both sides.)

3. To raise the height of the pole, turn knob (A) counterclockwise and pull up on the telescoping portion (B) of the pole and raise it to the desired height.

4. Turn knob (A) clockwise to tighten the telescoping portion in place.

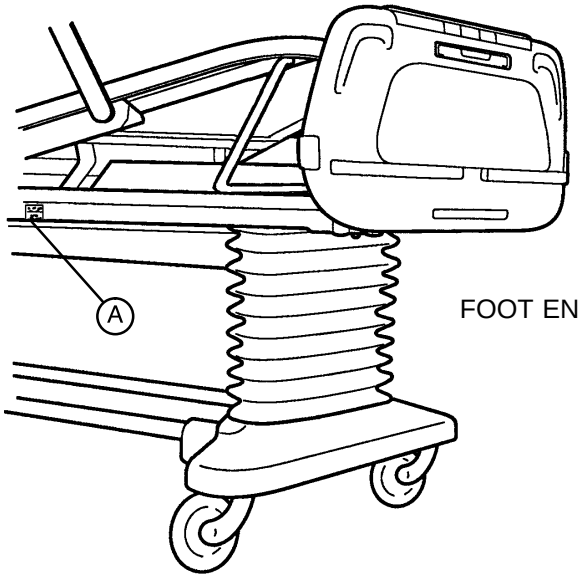
CAUTION

The weight of the I.V. bags should not exceed 40 pounds.

NIGHT LIGHT USAGE (Optional Equipment)

The bed may be equipped with two optional night lights (A) to illuminate the floor area around the bed.
There is a master switch at the foot end of the bed on the right side that turns both lights on and off. Each light also has a switch to control the individual light.

NOTE
If the switch is turned off on either of the individual lights, the master switch will not control that light.



PATIENT RESTRAINT STRAP LOCATIONS

The bed is equipped with 12 separate locations for installing patient restraint straps. The ”cutouts” in the bed top are located directly across from each other (on both sides of the bed).

WARNING
Improperly adjusted restraint straps can cause serious injury to a patient. The clinician must use her/his judgement to determine proper use of restraint straps and restraint strap locations.

Clean Velcro **AFTER EACH USE**. Saturate Velcro with disinfectant and allow disinfectant to evaporate. (Appropriate disinfectant for nylon Velcro should be determined by the hospital.)

NURSE CALL BACK–UP BATTERY

To prevent a low battery condition when the bed is not plugged in, position the cord out switch at the head end of the bed to the off position. The switch is identified by the label shown below. If the switch is not positioned as shown below and the bed power cord and pendant cord are unplugged, the life of the back–up battery will be significantly reduced.
If the power light (located on the foot board) is flashing, the Nurse Call battery needs to be replaced. The battery is located on the patient’s left side at the head end of the bed. No tools are required to replace the battery. Unplug the bed power cord from the wall socket and replace the battery.

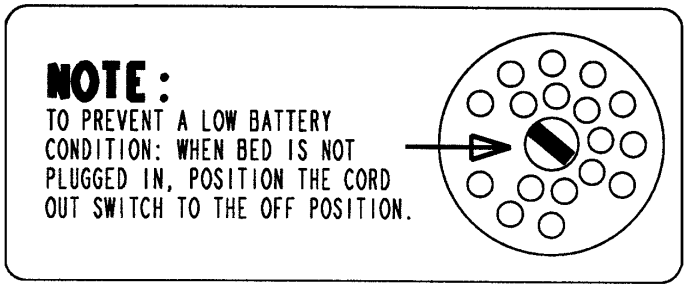
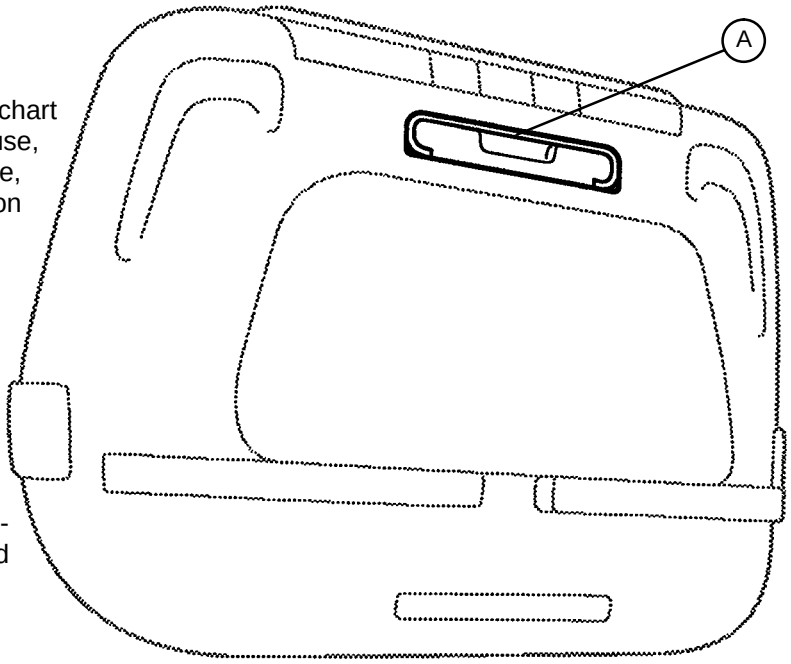


CHART RACK USAGE (Optional Equipment)

If the bed is equipped with the optional chart rack, it is located on the foot board. To use, pull handle rod (A) downward. To store, push the handle back to its storage position until it locks in place.

CAUTION

Do not use handle rod (A) as a device for pulling the bed. Doing so may cause damage to the chart rack and foot board.
The weight of items placed on the chart rack should not exceed 5 pounds or damage to the chart rack and foot board could occur.



FOOT END

CPR BOARD USAGE (Optional Equipment)

If the bed is equipped with the optional CPR board, it is stored on the bed's head board. To remove, pull away from the head board and lift out of storage position. If the CPR board option was not purchased, the head board can also be removed and used as an emergency CPR board.

POSITIONING SIDERAILS

NOTE
The siderails can be locked at two heights (intermediate & full).

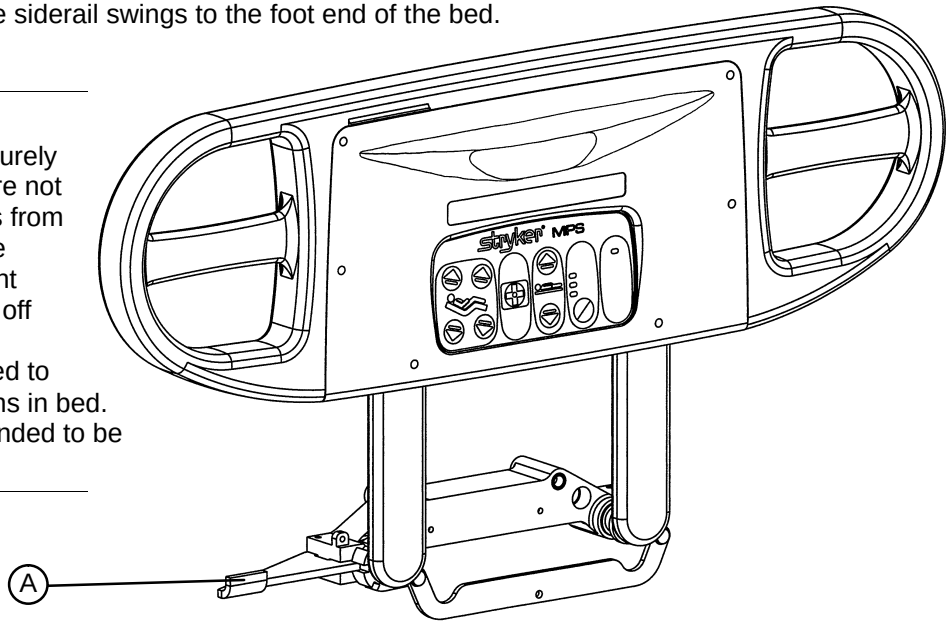
The siderails can be tucked away under the bed when not in use. To remove the rail from the tucked position, grasp the top of the rail and pull outward.

To engage the head end siderail, grasp the rail and swing it upward toward the head end of the bed until it rests in the ”intermediate” position. To continue to full height, push in the blue release handle (A) and rotate the siderail until full height is reached.

To engage the foot end siderail, the same procedure is required as for the head end siderail, however, the siderail swings to the foot end of the bed.

WARNING

Be sure rail is locked securely into position. Siderails are not intended to keep patients from exiting the bed. They are designed to keep a patient from inadvertently rolling off the bed. Proper restraint methods should be utilized to ensure the patient remains in bed. The siderails are not intended to be used as a push device.



To disengage the rail, push in the blue release handle (A) and swing rail down to desired height. Tuck away siderails by pushing the rails under the bed. Rails must be in the full down position before they can be tucked.

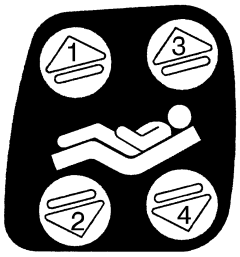
SIDERAIL CONTROL PANEL LIGHTS

The bed is equipped with lights to illuminate the head end siderail control panel and the red nurse call switches. Both can be activated at the foot board control panel. Three settings are available for the control panel lights: low, medium and high intensity. When all lights are off, push the siderail control light button at the foot board once to turn on both the control lights and the nurse call light at the siderail. Push again to change from low to medium setting, and a third time to change to the high setting. The nurse call light intensity is not affected. Pushing the button a fourth time will turn off the siderail control panel lights and pushing it a fifth time will turn off the red nurse call light as well (see control panel guide page 17).

CAUTION

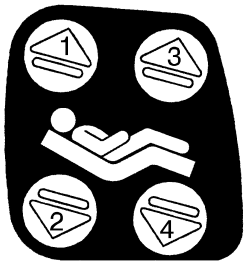
The intent of the red nurse call light on the siderails is to ensure the patient has immediate understanding of where to push to contact the nurse station. Turning this light off will compromise this ability, especially in a darkened room.

INSIDE SIDERAIL FUNCTION GUIDE



(Patient's Right Rail)

1. Push to raise Knee Gatch.
2. Push to lower Knee Gatch.
3. Push to raise Fowler.
4. Push to lower Fowler.



(Patient's Left Rail)

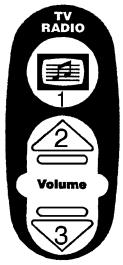
1. Push to raise Fowler.
2. Push to lower Fowler.
3. Push to raise Knee Gatch.
4. Push to lower Knee Gatch.

1. Push to activate Nurse Call.

NOTE

Yellow LED will light when button is pushed. Red LED will light with Nurse Station acknowledgment.

▶ This panel is optional equipment.

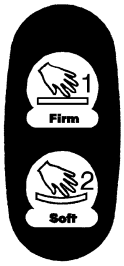


1. Push to turn TV or radio on and to select a channel.

2. Push to increase volume.

3. Push to decrease volume.

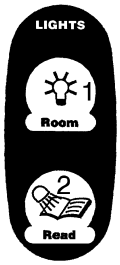
▶ This panel is optional equipment.



1. Push to increase firmness of mattress

2. Push to decrease firmness of mattress.
(See page 16 for system instructions).

▶ This panel is optional equipment.



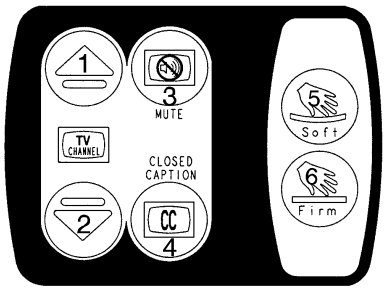
1. Push to turn the room light on.

2. Push to turn the bed overhead light on.

▶ This panel is optional equipment.

INSIDE SIDERAIL FUNCTION GUIDE (CONTINUED)

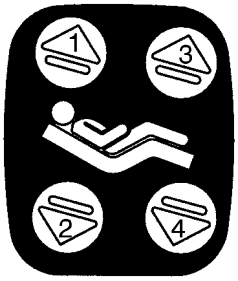
1. Push to turn TV on or off.
2. Push to raise the TV volume.
3. Push to lower the TV volume.



1. Push to change the TV channel up.
2. Push to change the TV channel down.
3. Push to mute TV volume. Push again to turn the sound back on.
4. Push to display closed captioning. Push again to turn off closed captioning.
5. Press to decrease the firmness of the mattress.
6. Press to increase the firmness of the mattress.

▶ These panels are optional equipment.

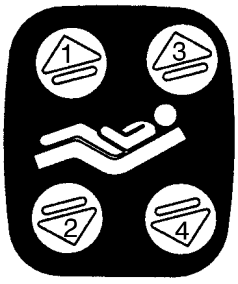
OUTSIDE SIDERAIL FUNCTION GUIDE



(Patient's Right Rail)

1. Push to raise Fowler.
2. Push to lower Fowler.
3. Push to raise Knee Gatch.
4. Push to lower Knee Gatch.

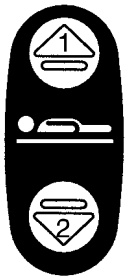
▶ This panel is optional equipment.



(Patient's Left Rail)

1. Push to raise Knee Gatch.
2. Push to lower Knee Gatch.
3. Push to raise Fowler.
4. Push to lower Fowler.

▶ This panel is optional equipment.



1. Push to raise bed height.
2. Push to lower bed height.

OUTSIDE SIDERAIL FUNCTION GUIDE (CONTINUED)

Push to activate Nurse Call.

▶ This panel is optional equipment.

LED will blink when the brakes are not set.

Push to activate auto or manual mode of the Dynamic Mattress System.
LED will light to indicate selected mode and/or possible air leak.

▶ This panel is optional equipment.

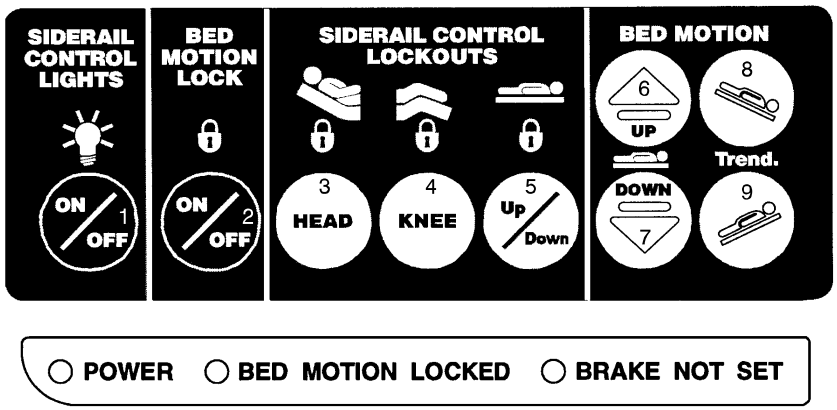
DYNAMIC MATTRESS SYSTEM USAGE (OPTIONAL EQUIPMENT)

1. The system can be set in either ”AUTOMATIC” or ”MANUAL” modes. The ”AUTO/MAN” switch is used to activate both modes. When Automatic mode is selected, the ”AUTOMATIC” LED on the siderail control panel will be on. When Manual mode is selected, the ”MANUAL” LED on the siderail control panel will be on. The “AUTO/MAN” switches are located on the control panels on the outside of the head end siderails (see above).
2. When the Automatic mode is selected, the firmness of the mattress will adjust automatically as needed. When the Manual mode is selected, the firmness of the mattress can be adjusted by the patient or the hospital clinical staff. The ”FIRM” and ”SOFT” switches are located on the control panels on the inside of the head end siderails (see page 14).

NOTE

The mattress power cord must be plugged into the bed for the mattress to operate. See page 7 for ”DMS Port” location.

FOOT BOARD CONTROL PANEL GUIDE



1. Push repeatedly for low, medium and high settings for siderail control lights. Pushing a fourth and fifth time will turn off the siderail control lights and the red nurse call light respectively (see page 13).

CAUTION

The intent of the red nurse call light on the siderails is to ensure the patient has immediate understanding of which button to push to contact the nurse station. Turning the red light off may compromise this ability, especially in a darkened room.

2. Push to lock out all bed motions. The MOTION lock icon and the “BED MOTION LOCKED” LED will light. Push again to unlock.
3. Push to lock out Back Rest controls at both siderails. The HEAD lock icon will light. Push again to unlock.
4. Push to lock out Knee Gatch controls at both siderails. The KNEE lock icon will light. Push again to unlock.
5. Push to lock out bed height movement at both siderails. The UP/DOWN lock icon will light. Push again to unlock.
6. Push to raise bed height.
7. Push to lower bed height.
8. Push to lower head end/raise foot end of bed (Trendelenburg position).
9. Push to lower foot end/raise head end of bed (Reverse Trendelenburg position).

FUNCTION LOCKOUT SYSTEM USAGE

1. To lock out the bed movement functions on the siderails and prevent the patient from changing the positioning of the bed, push the ”HEAD”, ”KNEE” and/or ”UP/DOWN” switches in the ”Siderail Control Lockouts” module on the foot board control panel.

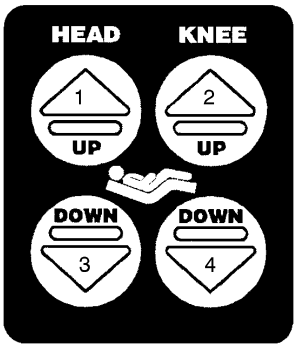
NOTE

The foot board controls for these motions are not affected by the lockout switches.

The ”padlock” symbol on the control panel will be lighted when that function is locked out.

2. To lock out the entire bed motion for all switches on the bed (siderails and foot board), push the ”ON/OFF” switch in the ”Bed Motion Lock” module on the foot board control panel.

FOOT BOARD CONTROL PANEL GUIDE (CONTINUED)

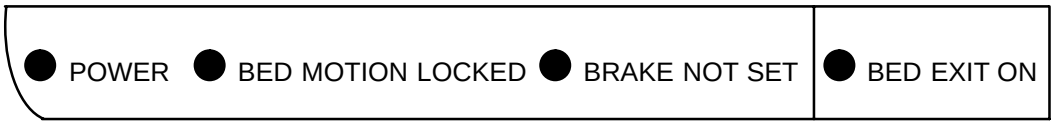


1. Push to raise Fowler.
2. Push to raise Knee Gatch.
3. Push to lower Fowler.
4. Push to lower Knee Gatch.

▶ This panel is optional equipment.

LED DISPLAY PANEL GUIDE

The LED Display Panel is located at the foot end of the bed, under the Control Panel.



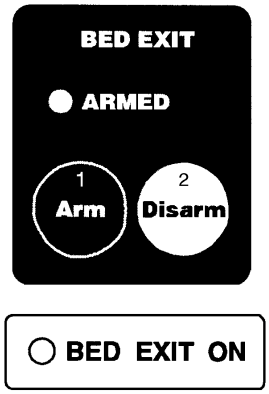
”POWER” – will light when the bed is plugged into the wall receptacle. Will blink if the 9V Nurse Call battery needs to be replaced.

”BED MOTION LOCKED” – will light when the Bed Motion Lock has been activated.

”BRAKE NOT SET” – will blink when the brakes have not been set.

”BED EXIT ON” – will light when the Bed Exit function has been activated (optional equipment).

CENTER OF GRAVITY BED EXIT (OPTIONAL EQUIPMENT)



1. Push to activate Bed Exit function.
2. Push to deactivate Bed Exit function.

NOTE

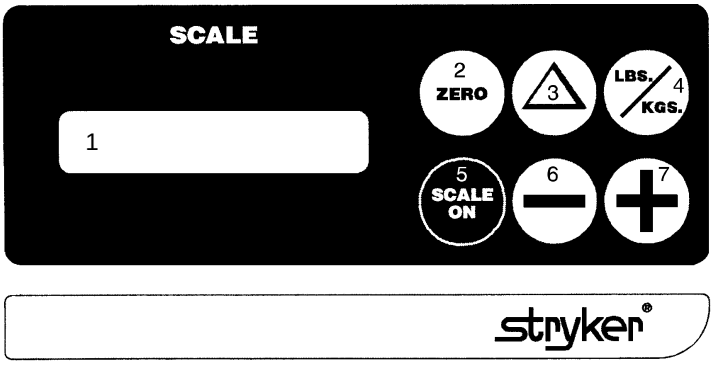
If the scale system is in use, it will switch to ”off” when Bed Exit is armed. Bed Exit will be temporarily disarmed when the scale system is activated and will re–arm when the scale system shuts off. When the bed is equipped with scales, the scales must be properly zeroed for the Bed Exit System to function properly (see page 22 for scale system usage instructions). If bed is not equipped with a scale system, follow the procedure below.

1. Before putting a new patient on the bed: prepare bed for patient stay by adding linens and equipment to the bed. Press and hold ”ARM” and ”DISARM” keys together for 5 seconds – ”ARMED” light will begin to flash. Release ”ARM” and ”DISARM” keys and do not touch the bed until ”ARMED” light stops flashing.
2. Once the new patient is on the bed: push ”ARM” key and release (”ARMED” light will come on).
3. To deactivate Bed Exit, push ”DISARM”. The ”ARMED” and ”BED EXIT ON” LED’s will turn off.

WARNING

The Bed Exit System is intended only to aid in the detection of a patient exiting the bed. It is NOT intended to replace patient monitoring protocol. It signals when a patient is about to exit. Adding or subtracting objects from the bed after arming the bed exit system may cause a reduction in the sensitivity of the bed exit system.

WEIGH SYSTEM CONTROL PANEL GUIDE



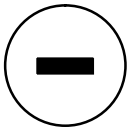
1. LCD – displays patient weight.
2. Push to zero bed.
3. Push when changing equipment on the bed.
4. Push to change weight from pounds to kilograms or back.
5. Push to turn weight system on.
6. Push to decrease numerical value of displayed weight.
7. Push to increase numerical value of displayed weight.

NOTE

After approximately 30 seconds of idle time, the scale display will turn off and will show the Trendelenburg angle of the bed. Press “SCALE ON” to return to the weight display.

SYMBOL	ACTION	DISPLAY
	To prepare bed for new patient:	
SCALE ON	Press and hold ”SCALE ON”. Release the button *after* the display reads: ”LET GO FOR SCALE”	”LET GO FOR SCALE” ”WEIGHING...” ”XXX.X LB”
ZERO	Press and hold ”ZERO”	”HOLD TO ZERO WT.” ”RELEASE TO ZERO”
	Release ”ZERO”	”DO NOT TOUCH BED” ”0.0 LB”

WEIGH SYSTEM CONTROL PANEL GUIDE (CONTINUED)

SYMBOL	ACTION	DISPLAY
	To add or remove equipment during patient stay without affecting registered patient weight:	
	Press and release ”SCALE ON”	”WEIGHING...” ”XXX.X LB”
	Press △	”HOLD TO START” ”RELEASE TO START”
	Release △	”DO NOT TOUCH BED” ”ADD/REMOVE EQUIP.”
	Add or remove equipment.	
	Press △	”RELEASE TO FIN.”
	Release △	”DO NOT TOUCH BED” ”XXX.X LB”
	To convert the patient’s weight:	
	To convert the patient’s weight to kilograms, press and release ”LBS./KG.”	”WEIGHT NOW KGS” ”XXX.X KG”
	Repeat the procedure to return to pounds.	
	To change the numerical value of displayed weight:	
	Press − and hold to scroll to desired weight.	”HOLD TO DEC. WT.” ”XXX.X LB”
	Press + and hold to scroll to desired weight.	”HOLD TO INC. WT.” ”XXX.X LB”

OPERATING THE SCALE BEFORE PUTTING A NEW PATIENT IN BED

- Prepare bed for patient stay (linens, pillows, etc.).
- Press and hold ”SCALE ON”. Release the button *after* the display reads ”LET GO FOR SCALE”. (This will turn off the Trend. angle display and activate the scale). The scale monitor will read:

”LET GO FOR SCALE”

”WEIGHING”

”XXX.X LB”

- Press and hold ”ZERO”. The scale monitor will read:

”HOLD TO ZERO WT.”

”RELEASE TO ZERO”

- Release ”ZERO”. The scale monitor will now read:

”DO NOT TOUCH BED”

”0.0 LB”

The bed is now ready for the patient.

NOTE

Do not zero the bed while a patient is in bed. Inaccurate patient weight reading will result. If this should occur, remove the patient and zero the bed.

OPERATING THE SCALE IF PATIENT IS ALREADY IN BED

- If it is necessary to add or remove special equipment (monitors, pumps, etc.) during the patient’s stay, press and release ”SCALE ON” to activate the weigh system. After the scale monitor reads ”XXX.X LB”, press and hold . The scale monitor will read:

”HOLD TO START”

”RELEASE TO START”

- Release . The scale monitor will read:

”DO NOT TOUCH BED”

”ADD/REMOVE EQUIP”

- Add or remove the equipment and press . The scale monitor will read:

”RELEASE TO FIN.”

- Release . The scale monitor will read:

”DO NOT TOUCH BED”

”XXX.X LB”

The weight displayed will be that of the patient only.

Weigh System Usage

CONVERTING THE PATIENT'S WEIGHT

- To convert the patient's weight from pounds to kilograms, press and release "SCALE ON" to activate the weigh system. After the scale monitor reads "XXX.X LB", press and release the "LBS/KGS" button. The scale monitor will read:

  "WEIGHT NOW KGS"

  "XXX.X KG"

- Repeat the procedure to return to pounds. The display will read:

  "WEIGHT NOW LBS"

  "XXX.X LB"

CHANGING THE NUMERICAL VALUE OF DISPLAYED WEIGHT

- To decrease the numerical value of the displayed weight, press and hold "**–**". The scale monitor will read:

  "HOLD TO DEC. WT."

  "XXX.X LB"

- Hold "**–**" until desired value is achieved.

- To increase the numerical value of the displayed weight, press and hold "**+**". The scale monitor will read:

  "HOLD TO INC. WT."

  "XXX.X LB"

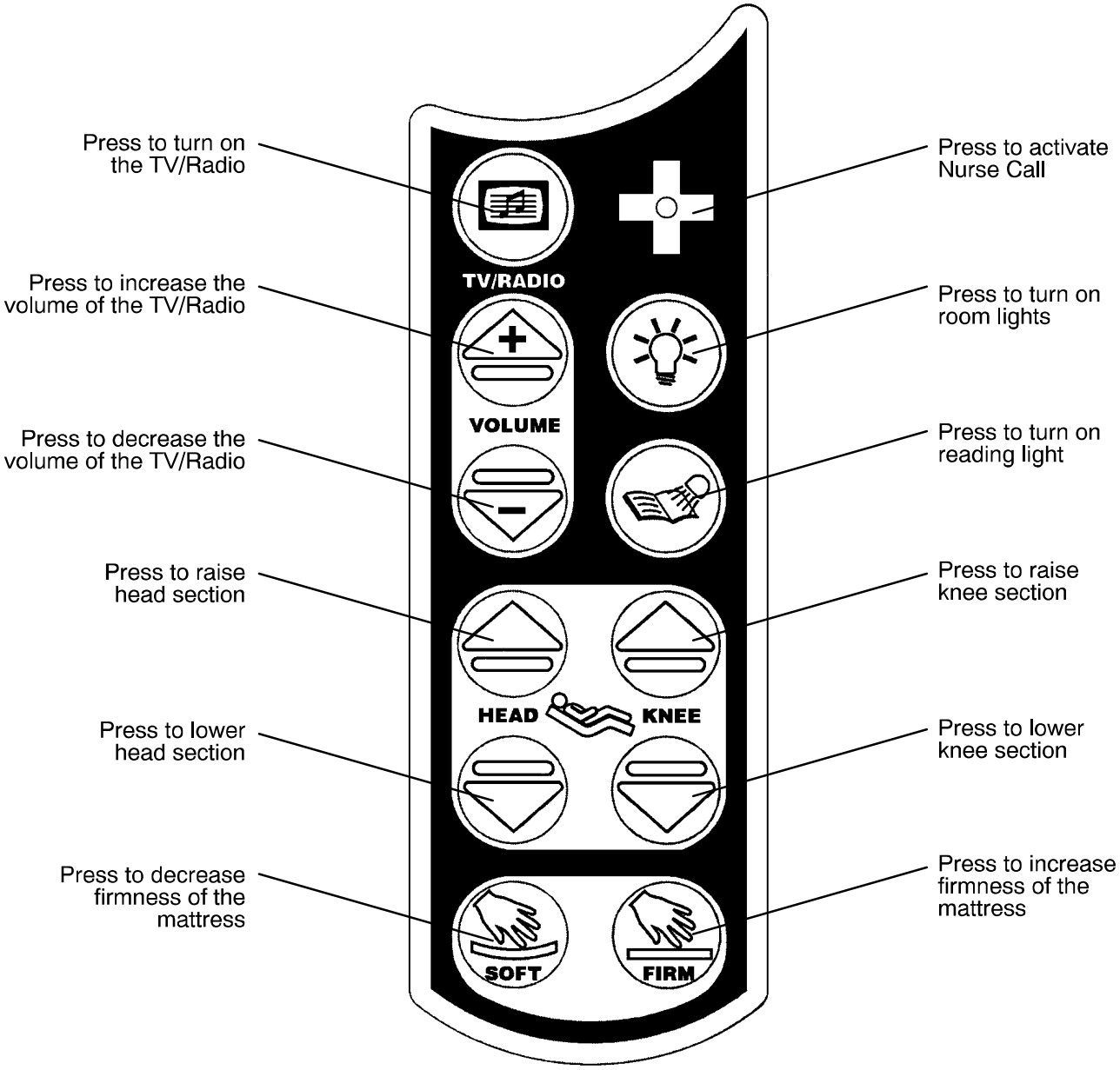
- Hold "**+**" until desired value is achieved.

NOTE

The weigh system will shut off approximately one minute after a function has been used, if another function is not activated. Display light will shut off and display will read "SCALE OFF".

The weigh system will retain all patient weight information in its memory even when the scale monitor is off or when the bed is unplugged from the wall socket.

Optional Pendant Operation


Press to turn on the TV/Radio
Press to increase the volume of the TV/Radio
Press to decrease the volume of the TV/Radio
Press to raise head section
Press to lower head section
Press to decrease firmness of the mattress
TV/RADIO
VOLUME
HEAD
KNEE
SOFT
FIRM
Press to activate Nurse Call
Press to turn on room lights
Press to turn on reading light
Press to raise knee section
Press to lower knee section
Press to increase firmness of the mattress

Warranty

Limited Warranty:

Stryker Medical Division, a division of Stryker Corporation, warrants to the original purchaser that its products should be free from defects in material and workmanship for a period of either: one (1) year parts and labor **or** two (2) years for parts only, after date of delivery. Stryker's obligation under this warranty is expressly limited to supplying replacement parts for, or replacing, at its option, any product which is, in the sole discretion of Stryker, found to be defective. Stryker warrants to the original purchaser that the frame and welds on its beds will be free from structural defects for as long as the original purchaser owns the bed. If requested by Stryker, products or parts for which a warranty claim is made shall be returned prepaid to Stryker's factory. Any improper use or any alteration or repair by others in such manner as in Stryker's judgement affects the product materially and adversely shall void this warranty. No employee or representative of Stryker is authorized to change this warranty in any way.

This statement constitutes Stryker's entire warranty with respect to the aforesaid equipment. STRYKER MAKES NO OTHER WARRANTY OR REPRESENTATION, EITHER EXPRESSED OR IMPLIED, EXCEPT AS SET FORTH HEREIN. THERE IS NO WARRANTY OF MERCHANTABILITY AND THERE ARE NO WARRANTIES OF FITNESS FOR ANY PARTICULAR PURPOSE. IN NO EVENT SHALL STRYKER BE LIABLE HEREUNDER FOR INCIDENTAL OR CONSEQUENTIAL DAMAGES ARISING FROM OR IN ANY MANNER RELATED TO SALES OR USE OF ANY SUCH EQUIPMENT.

To Obtain Parts and Service:

Stryker products are supported by a nationwide network of dedicated Stryker Field Service Representatives. These representatives are factory trained, available locally, and carry a substantial spare parts inventory to minimize repair time. Simply call your local representative, or call Stryker Customer Service at (800) 327–0770.

Extended Warranty Coverage:

Stryker offers warranties to provide an extension of the above stated warranty, that are available upon the purchase of the Model 3000 Bed.

Covered under these warranties:

- All replacement parts, as set forth in the limited warranty statement above (excluding mattresses and consumable items)
  NOTE: mattresses carry a separate warranty plan. Refer to mattress documentation.
- Labor and Travel for all scheduled and unscheduled calls (if labor option is chosen).

The following extended options are available at a nominal charge:

- 3 years parts – no labor (1 year extension to standard 2 year parts warranty).
- 4 years parts – no labor (2 year extension to standard 2 year parts warranty).
- 5 years parts – no labor (3 year extension to standard 2 year parts warranty).

- 2 years parts and labor (1 year extension to standard 1 year parts and labor warranty).
- 3 years parts and labor (2 year extension to standard 1 year parts and labor warranty).
- 4 years parts and labor (3 year extension to standard 1 year parts and labor warranty).
- 5 years parts and labor (4 year extension to standard 1 year parts and labor warranty).

Return Authorization:

Merchandise cannot be returned without approval from the Stryker Customer Service Department. An authorization number will be provided which must be printed on the returned merchandise. Stryker reserves the right to charge shipping and restocking fees on returned items.

SPECIAL, MODIFIED, OR DISCONTINUED ITEMS NOT SUBJECT TO RETURN.

Damaged Merchandise:

ICC Regulations require that claims for damaged merchandise must be made with the carrier within fifteen (15) days of receipt of merchandise. DO NOT ACCEPT DAMAGED SHIPMENTS UNLESS SUCH DAMAGE IS NOTED ON THE DELIVERY RECEIPT AT THE TIME OF RECEIPT. Stryker Customer Service must be notified immediately. Stryker will aid the customer in filing a freight claim with the appropriate carrier for damages incurred. Claim will be limited in amount to the actual replacement cost. In the event that this information is not received by Stryker within the fifteen (15) day period following the delivery of the merchandise, or the damage was not noted on the delivery receipt at the time of receipt, the customer will be responsible for payment of the original invoice in full.

Claims for any short shipment must be made within thirty (30) days of invoice.

International Warranty Clause

This warranty reflects U.S. domestic policy. Warranty outside the U.S. may vary by country. Please contact your local Stryker Medical representative for additional information.

Service Contract Coverage (Optional):

Stryker has developed a comprehensive program of service contract options designed to keep your equipment operating at peak performance at the same time it eliminates unexpected costs. We recommend that these programs be activated *before* the expiration of the new product warranty to eliminate the potential of additional equipment upgrade charges. Stryker offers the following contract coverages at a nominal fee:

Extended (Parts and Labor)

- All replacement parts (excluding mattresses and consumable items)
- Labor and travel for *all* scheduled and unscheduled calls
- Annual Preventive Maintenance Inspections and repairs
- JCAHO paperwork for preventive maintenance
- Priority Emergency Service

Standard (Labor Only):

- Labor and travel for *all* scheduled and unscheduled calls
- Annual Preventive Maintenance Inspections and repairs
- JCAHO paperwork for preventive maintenance
- Priority Emergency Service

Basic (Parts Only):

- All replacement parts (excluding mattresses and consumable items)
- Priority Emergency Service

Please call your local representative, or call (800) 327–0770 for further information

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